INFORMATION:

Department of Public Health

Bureau of Food and Drug Inspections Statement Concerning Lithium Chloride

When lithium chloride was first proposed for use as a salt substitute, the Food and Drug Administration started pharmacological experiments to determine its safety and recommended that manufacturers likewise check the safety of the product before marketing it. Experiments in our laboratories recently showed that lithium chloride is toxic to animals. However, a large manufacturer of a lithium chloride-containing salt substitute reported that extensive clinical experiments sponsored by him showed lithium chloride to be safe for human beings, thus casting some doubt upon the applicability of animal experiments to humans.

Recently, untoward reactions in humans consuming Westsal which may have been due to lithium chloride came to our attention, and recall of lithium chloride preparations was suggested to and inaugu-

rated by manufacturers.

On Friday, February 18, the Food and Drug Administration learned of deaths attributed to lithium chloride and public announcements of the dangers of lithium chloride were distributed immediately.

Inquiries from consumers show that salt substitutes containing lithium chloride were being used by many individuals on the advice of doctors who understood that the substitutes were harmless. At the time of the radio and newspaper publicity, these consumers in large measure had not heard of the dangers accompanying use of lithium chloride.

Consumers who have been using a lithium chloride-containing salt substitute should discontinue use immediately. If symptoms of lithium poisoning have not appeared, it is likely there will be no damage. Medical reports show that people who suffered mild symptoms of poisoning recovered when they discontinued use of lithium chloride.

In case of severe symptoms, the physician should be consulted immediately. It has been suggested that cautious intravenous administration of sodium chloride solution may be of value in treating poisoning from lithium chloride.

The symptoms of lithium chloride poisoning are drowsiness, weakness, loss of appetite, nausea, tremors of the extremities, blurring of vision and coma. Products containing lithium chloride are usually sold in drug stores and/or health food stores, and every effort should be made to remove these products from the market, notifying the dealer to contact the wholesaler and/or distributor from whom these products were purchased so that they may be returned for credit.

The brands on the California market containing lithium chloride as an ingredient are:

Westsal and Wes-sal—Manufactured by Westwood Pharmaceuticals, Division of Foster Milburn, Buffalo, New York.

Milosal—Louis Milani Foods, Inc., 4058 South Walker Avenue, Maywood, California.

Foodsal-Foods Plus, Inc., New York, N. Y.

Saltisal and Salti-salt—Lueth's Bakery, Kansas City, Missouri.

Neocurtasal—Winthrop Chemical Company, New York, N. Y. Only Neocurtasal which is sold to food industries such as bakery and cracker manufacturers in containers of 25 pounds or larger, said product containing lithium chloride. Note: Neocurtasal sold over the counter and on prescription and in health food stores, which contains potassium chloride, ammonium chloride, starch, potassium formate, calcium formate, and magnesium citrate, is not involved in this investigation and should not be removed from the market.

Attention should also be called to the fact that there may be other salt substitute products on the market containing lithium chloride.

It has come to our attention that some consumers believe some brands of ordinary table salt are causing these injuries. Lithium chloride is marketed as a liquid. The granular table salt, sodium chloride, is not under suspicion.

Hospitals, drug stores, dealers and health food stores should be instructed to return the above brands of salt substitutes containing lithium chloride to the distributor, obtaining a receipt for the same.

Dried Plasma Surplus Exhausted

The State Department of Public Health has been advised by the American Red Cross that the surplus supply of dried plasma is now exhausted and that the distribution by the Red Cross to the civilian medical practice has been discontinued. When current stocks in health departments and hospitals have been used the State Department of Public Health will therefore not be able to replenish these stocks.

In October 1946 the American Red Cross made this biologic surplus to the need of the armed forces available to the civilian physicians. The Division of Laboratories of the State Department of Public Health undertook the distribution to the local health officers who in turn dispensed the plasma to their local physicians. Since the inauguration of the program over 70,000 units have been distributed.

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Damage Action Against Municipality Based on Poliomyelitis Infection From Sewage

In trial of an action for damages of \$100,000 brought against the City of Mill Valley, Marin County, by the parents of a minor child who was alleged to have contracted poliomyelitis from sewage that backed up into the child's residence, the jury brought in a verdict in favor of the defendant municipality. The suit is believed to be the first in California based on an allegation that the disease was caused by exposure to sewage.

As the child in whose name the action was brought was one of 11 persons in Mill Valley who had the disease during the epidemic of 1945, the trial was seen as one of far-reaching implications, and appeal by the municipality in event the verdict had been

unfavorable was considered a certainty.

Judge Edward Butler, who presided over the Marin County Superior Court in which the case was tried, had denied a motion by the defendant that the action be dismissed for lack of evidence and precedent. In denying the motion the court ruled that the case was of such importance as a test that it should be decided by a jury.

There was testimony for the plaintiff that on sev-

eral occasions sewage had backed up into the basement of his residence and that after the floor was cleaned he had played with toys there. It was contended that as a result he had contracted poliomyelitis May 26, 1945. Testimony as to whether the sewage had spread upon the basement floor in the last week in April or, as the city contended, in January and February of 1945, was conflicting. Evidence was also introduced that fecal matter was seen on the streets and in an adjacent creek, but the exact time was not shown, nor the proximate cause.

Several clinicians testified for the plaintiff and three epidemiologists and clinicians for the defense. Among the expert witnesses for the defense was Dr. William McD. Hammond, professor of epidemiology at the University of California Medical School. Dr. Hammond had studied the Mill Valley outbreak from the start, observing patients clinically, obtaining histories and securing virus specimens. His testimony, in effect, ruled out sewage as the source of infection and gave person-to-person spread, directly or indirectly, as the most likely cause.

Plaintiff's motion for a new trial was denied.

